

DANGER

**CONFINED SPACE
PERMIT REQUIRED
BEFORE ENTRY**

North Carolina State Confined Space Rescue Resources Survey

Sharing Ideas, Saving Lives

Name of Agency _____

Address _____

Telephone _____ Fax _____ Email _____

Agency Head _____ Phone _____ Email _____

Contact _____ Phone _____ Email _____ Pager _____

Alt Contact _____ Phone _____ Email _____ Pager _____

1. Does your agency / organization have any confined space rescue capabilities? If so please give a brief description.

2. Do you have a specialty confined space rescue team? If so please describe the composition and duties of the team. (Instructors, Specialized persons in that particular area.

3. How many total people are in your agency? Paid: _____ Volunteer _____

Of these, how many have had confined space rescue training? _____

What type of training (ART, BRT, etc)

Who conducted the training and did it result in certification? (D.O.I., Military, etc)

4. What confined space equipment do you have available in your organization? (Tripods, pulleys, rope, confined space stretchers, atmospheric monitors, etc)

5. How long would it take your agency to respond to a confined space emergency in your jurisdiction?

In surrounding counties?

In your region or statewide?

Do you answer calls for any state agency? If so, where and for who.

6. Is your agency available for deployment outside of your jurisdiction? If so how much lead time will you require?

7. In an area disaster such as "Hurricane Fran", how many people and how much equipment could you deploy (assuming your area is not affected) for confined space rescue missions how long would it take you to get ready?

If deployed would your agency be self-sufficient? For how long? If not, what support would you require?

Do you have sufficient transport to move your personnel and equipment? If not, what would you need?

8. In the event of a deployment, how long could your team be available?

8 hours _____ 24 hours _____ 72 hours _____ One week _____ More _____

9. What confined space rescues have you performed in the past?
10. What amount of time do you spend training in confined space situations?
11. Would your team or individual team member be willing to train with other personnel and units across the state? If yes, how often would you like to see joint training exercises.
- Once a quarter _____ Biannual _____ Once a year _____

Thank you for participating in this survey. Our goal is to have a resource manual which can benefit all rescue agencies across the state. Any other information that may be beneficial, please send it with your survey.

NORTH CAROLINA TECHNICAL RESCUE RESOURCES

If your agency would like to be listed, please complete the appropriate forms and mail them to:

Thad Bryson
North Carolina Emergency Management
Search and Rescue Coordinator
75 Hickory Flats Road
Marshall, NC 28753

If you have questions, you may contact Mr. Bryson:

(828) 649-9317 Office
(828) 649-0329 Fax
(800) 812-4685 Pager
E-mail: tbryson@ncem.org